

# BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.		FILING DATE	
						APPLICANT(S)			
CLAIMS									
<b>AS FILED</b> IND.    DEP.	<b>AFTER</b> 1st AMENDMENT		<b>AFTER</b> 2nd AMENDMENT		<b>*</b> IND.    DEP.	<b>*</b> IND.    DEP.		<b>*</b> IND.    DEP.	
	1	/							
	2	/							
	3	/							
	4	/							
	5	/							
	6	/							
	7	/							
	8	/							
	9	/							
	10	/							
	11	/							
	12	/							
	13	/							
	14	/							
	15	/							
	16	/							
	17	/							
	18	/							
	19	/							
	20								
	21								
	22								
	23								
	24								
	25								
	26								
	27								
	28								
	29								
	30								
	31								
	32								
	33								
	34								
	35								
	36								
	37								
	38								
	39								
	40								
	41								
	42								
	43								
	44								
	45								
	46								
	47								
	48								
	49								
50									
<b>TOTAL IND.</b>									
<b>TOTAL DEP.</b>									
<b>TOTAL CLAIMS</b>									

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS